

ERENCE & ASSOCIATES
Amendment Transmittal

Atty. Docket No. YOR920010151US1
(590.057)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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DEC 27 2004

In re Application of : Das et al.
Serial No. : 09/829,701 Examiner : C. Kyle
Filed : April 10, 2001 Group Art Unit : 3624
For : AUTOMATED BIDDING AGENT FOR ELECTRONIC AUCTIONS

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

1. ☒ Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.
- OR
2. ☒ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. ☐ Small Entity status of this application has been established by a verified statement previously submitted.
4. ☐ A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF TRANSMISSION UNDER 37 CFR § 1.8(a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being facsimile transmitted on (703) 872-9306 on December 27, 2004 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III
(Type or print name of person mailing paper or fee)


(Signature of person mailing paper or fee)

Page 1 of 2

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5. ☐ Also enclosed: _____
6. ☒ No additional filing fee is required.
7. ☐ The filing fee has been calculated as shown below:

	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
				RATE	FEE		RATE	FEE
Total	45	** 49	= *	\$25	=	O	\$50	= 0
Claims						R		
Ind.	8	*** 8	= * 0	\$100	=	O	\$200	= 0
Claims						R		
<input type="checkbox"/> Multiple Dependent Claim Presented				\$180	=	O	\$360	=
						R		
				TOTAL	= \$	O	TOTAL	= \$0
						R		

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

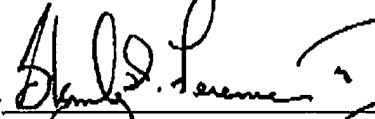
** If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.

*** If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. ☐ Applicant encloses herewith a check for \$_____ to cover the filing fee.
9. ☐ The Commissioner is hereby authorized to charge the \$_____ filing fee to Deposit Account No. 50-0510.
10. ☒ The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

FERENCE & ASSOCIATES

 By 
 Stanley D. Ference III
 Reg. No. 33,879

Dated: December 27, 2004

Mailing Address:

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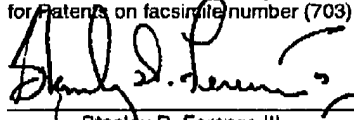
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December 27, 2004

AMENDMENT

I hereby certify that this correspondence and any documents referred to as enclosed therewith are being transmitted by facsimile to the Commissioner for Patents on facsimile number (703) 872-9306 on December 27, 2004.


Stanley D. Ference III
Reg. No. 33,879

December 27, 2004
Date of Signature

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Responsive to the Office Action dated August 26, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 12 of this paper.